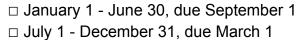


Iowa Waste Tire Processor Semi-Annual Activity Report Report Period _____





Instructions:

- Complete all sections with the information requested.
- Sign the form where indicated
- Return the form to the address at right
- Retain copies of receipts and records used to prepare this report

Send completed form to:
 Kirsten L. Duke
 Land Quality Bureau
lowa Dept. of Natural Resources
 502 E. 9th St.
Des Moines, Iowa 50319-0034

SECTION I – PROCESSOR INFORMATION			
A. NAME OF TIRE PROCESSING FIRM:			B. IOWA TIRE PROCESSOR PERMIT #
C. Address (P.O. Box, Street, City, State, ZIP):			D. TELEPHONE:
E. PERSON COMPLETING THIS FORM (PRINT NAME):			
SECTION II – QUANTITY OF TIRES RECEIVED YOU MAY REPORT THE QUANTITIES OF WASTE TIRES YOU RECEIVED FROM YOUR CUSTOMERS IN EITHER TOTAL TONNAGE OR COUNT BY TYPE OF TIRE. PLEASE SELECT ONLY ONE TYPE OF REPORTING METHOD.			
A. Total Tonnage Received from Iowa:		B. Total Count of Tires Received from Iowa:	
		Passenger car/light truck:	
	◀ OR ▶	Semi-truck	
		Tractor tires	
		Other (please list	type)
Total Tonnage:		Total Count:	
C. Total Tonnage Received from Out-of-State (mark "0" if not applicable):		D. Total Count of State (mark "0" if	f Tires Received from Out-of- not applicable):
	∢ OR ▶	Passenger car/lig	ht truck:
		Semi-truck	
		Tractor tires	
		Other (please list	type)
Total Tonnage:		Total Count:	

SECTION III - PROCESSED TIRE DELIVERY LOCATIONS: LIST THE SITE OF DELIVERY FOR ALL TIRES PROCESSED AS REPORTED IN SECTION II, INCLUDING TOTAL TONNAGE OR COUNT DELIVERED TO EACH LOCATION. NOTE: YOUR TOTALS REPORTED HERE SHOULD EQUAL THE TOTAL TONNAGE/COUNT REPORTED IN SECTION II. ATTACH ADDITIONAL PAGES FOR DELIVERY LOCATIONS IF NECESSARY. PRODUCT TYPE (Tire-Derived Fuel, Crumb Rubber, Processed for **LOCATION 1**: NAME OF LOCATION Landfill Disposal, etc.) **ADDRESS** (street, city, county, state, zip, - do not list P.O. Boxes) TOTAL QUANTITY OF PROCESSED TIRES DELIVERED (tonnage or count) PRODUCT TYPE (Tire-Derived Fuel, Crumb Rubber, Processed for **LOCATION 2**: NAME OF LOCATION Landfill Disposal, etc.) **ADDRESS** (street, city, county, state, zip, - do not list P.O. Boxes) TOTAL QUANTITY OF PROCESSED TIRES DELIVERED (tonnage or count) **LOCATION 3**: NAME OF LOCATION PRODUCT TYPE (Tire-Derived Fuel, Crumb Rubber, Processed for Landfill Disposal, etc.) TOTAL QUANTITY OF PROCESSED TIRES DELIVERED (tonnage or **ADDRESS** (street, city, county, state, zip, - do not list P.O. Boxes) count) PRODUCT TYPE (Tire-Derived Fuel, Crumb Rubber, Processed for **LOCATION 4**: NAME OF LOCATION Landfill Disposal, etc.) **ADDRESS** (street, city, county, state, zip, – do not list P.O. Boxes) TOTAL QUANTITY OF PROCESSED TIRES DELIVERED (tonnage or count) **SECTION IV – TIRES STORED ON SITE:** LIST THE QUANTITY OF UNPROCESSED WASTE TIRES ON HAND AT THE FACILITY AT THE TIME OF REPORTING. ALSO LIST THE QUANTITY OF PROCESSED TIRE MATERIAL CURRENTLY STORED AT THE FACILITY, BY PRODUCT TYPE. TOTAL QUANTITY OF UNPROCESSED TIRES ON HAND (tonnage TOTAL QUANTITY OF PROCESSED TIRE MATERIAL STORED or count) (tonnage or count) SECTION V. CERTIFICATION I certify under penalty of law that I am the owner, operator, or authorized representative of the waste tire processor listed in this report, and that I have examined and am familiar with the information reported above, and that I believe the information is true, accurate and complete.

Signature Printed Name Date Telephone Number Fax Email